

REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14)

IS THIS AN AMENDMENT? Yes

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this form. For assistance in completing this form, see instructions on the reverse side.

(CFA-4) **Summary Sheet**

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TOTAL PAGES IN ENTIRE CFA-4 REPORT

COMMITTEE INFORMATION							
1. Full Name of Committee (as on Statement of Organization) Check if this is a new name							
The Committee to Elect Sarah Kincaid							
			nmittee Telephone Number				
	(317) 783-03	07				
4. Mailing Address (address where all campaign finance correspondence is received) Check if this is a new address							
201 S. 8 th Ave	.						
5. City, State, ZIP Code 6. Part			y Affiliation (if applicable)				
Beech Grove, IN 48107 Reput							
CANDIDATE INFORMATION (For Candidate's Co	_						
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			y Affiliation or If Independent Candidate				
Sarah Marie Kincaid	Repub						
Mario			unty of Residence				
Beech Grove Clerk Treasurer							
TYPE OF REPORT				ON CANDIDATES ONLY			
11. Check one:		Check one:					
Pre-Primary Pre-Election Annual Nomination Other		Pre-Convention					
Final/Disbands Committee (lines 18, 19, and 20 must be *0") Outgoing Treasurer (within 10 days amend Statement of Organization)							
12. Reporting Period:			LUMN A s Period	COLUMN B Year to Date			
From: 10/13/07 Through: 12/31/07	<u> </u>		s renou	real to Bate			
13. Cash on hand and investments at the beginning of this reporting period.		0					
14. Cash on hand and investments January 1, current year.				0			
CONTRIBUTIONS AND RECEIPTS							
(Note: these amounts include in-kind contributions and loans, as well as cash contributions.)	· · ·	0		0			
15a. Itemized (use Schedule A)		0		0			
15b. Unitemized 15c. Add lines 15a and 15b in both columns SUBTO	OTAL	0		0			
Tool / Add lines For all	OTAL	0		0			
16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B EXPENDITURES	UIAL	U	_				
(Note: These amounts include in-kind expenditures and loan repayments.)							
	0	-	0				
17a. Itemized (use Schedule B) (Public Question: use Schedule C)	0		0				
17b. Unitemized	TOTAL	0		0			
	0	·· —	0				
18. Cash on hand and investments at close of this reporting period (subtract 17c from 16 in both columns) TOTAL				10			
19. Debts OWED BY the committee (use Schedule D)		0	,				
20. Debts OWED TO the committee (use Schedule E)		0					
				FOR OFFICE LICE ONLY			

CERTIFICATION						
I CERLIFY THAT I HAVE EXAMINED THIS STATEMENT. TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TRUE, CORRECT AND COMPLETE.						
Signature of Treasurer / Washington	Treasurer	Date / 11 / 08				
Signature of Candidate (if Applicable)		Date 1/1/08				
WARNING: Any information contained in this record may not be copied for sale or used for any commercial purpose. IIC 3-9-4-5) A person who knowingly						

FOR OFFICE USE ONLY

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